PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10646481

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FO	R	-	NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	375.00	OR	BASIC FEE	750.00
то	TAL CHARGEA	BLE CLAIMS	/ / minus 20=		* O			X\$ 9=		OR	X\$18=	P
IND	EPENDENT CL	AIMS	7 m	ninus 3 =	* 0			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT					·			+140=		OR	+280≈	J-
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	250
CLAIMS AS AMENDED - PART II								SMALL ENTITY			OTHER SMALL	
		(Column 1) CLAIMS		(Colui		(Column 3)	r	SWALL		OR I I	SWALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIN			+140=		OR	+280=	
							ı	TOTAL			TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colu		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		1	+140=		OR	+280=	
							Ł	TOTAL		OB	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE		•	ADUII. FEE	
		CLAIMS			(EST	(Coldinitio)	1 .		ADDI	1		1.00
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	I	X42=			X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPEND				T CLAIN	1	}			OR		ļ
	If the patry is selv	ımn 1 ie lees than t	ha antru la ca	dume o uma	o "O" in a	olumn 2		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	mber Previously Pa	aid For" (Total	or Independ	ient) is th	e highest numbe	er fou	and in the app	propriate bo	x in co	lumn 1.	